

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MR G		4/27/00
O.I.P.E. CLASSIFIER			5/1
FORMALITY REVIEW	J.S.	69134	
RESPONSE FORMALITY REVIEW			6-21-00
Best Available C			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	7/26/00	
2	✓	7/26/00	
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5	✓		
6	0		
7	✓		
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24	N		
25	✓		
26	✓		
27	✓		
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
stapl additional sheet here

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